



**Office of  
Mental Health**

# **PSYCKES For BHCCs and Other Networks**

**We will begin shortly**

**To hear the webinar, click “Call Me” in the Audio Connection box and enter your phone number - the WebEx system will call your phone**

**If you do not see the Audio Connection box, go to the top of your WebEx screen, click “Communicate” > “Audio Connection” > “Join Teleconference”**

**Coren Smith  
Medical Informatics Unit  
Office of Population Health and Evaluation  
May 3, 2023**

# Q&A via WebEx

- All phone lines are muted
- Use the “Q&A” feature in WebEx menu to ask a question
- Type questions in the “Q&A” box and submit to “all panelists” (default)
- Please do not use “Chat” function for questions
- Slides will be emailed to attendees after the webinar and recording will be posted on PSYCKES website

# Agenda

- PSYCKES overview
- Access to client data
- Quality improvement with My QI Report
- Population health with Recipient Search
- Review client-level details with the Clinical Summary
- Utilization Reports
- Training & technical assistance

# PSYCKES Overview

# What is PSYCKES?

- A secure, HIPAA-compliant online application for sharing Medicaid claims and encounter data and other state administrative data
- Designed to support data-driven clinical decision-making, care coordination and quality improvement
- Ongoing data updates
  - Clinical Summary updated weekly
  - Quality Indicator reports updated monthly

# Who is Viewable in PSYCKES?

- Over 11 million NYS Medicaid enrollees (currently or past)
  - Fee for service claims
  - Managed care enrollees, all product lines
  - Dual-eligible (Medicare/Medicaid) and Medicaid/Commercial
- Behavioral Health Population (any history of):
  - Psychiatric or substance use service,
  - Psychiatric or substance use diagnosis, OR
  - Psychotropic medication
- Provides all data – general medical, behavioral health, residential

# What Data is Available in PSYCKES?

- Clinical Summary provides up to 5 years of data, updated weekly
- All Medicaid FFS claims and Managed Care encounter data, across treatment settings
  - Medications, medical and behavioral health outpatient and inpatient services, ER, care coordination, residential, lab, and more!
- Multiple other state administrative databases (0-7 day lag):
  - New York City Department of Homeless Services (NYC DHS)
  - Health Home enrollment & CMA provider (DOH MAPP)
  - Managed Care Plan & HARP status (MC Enrollment Table)
  - MC Plan assigned Primary Care Physician (Quarterly, DOH)
  - State Psychiatric Center EMR
  - Assisted Outpatient Treatment provider contact (OMH TACT)
  - Assertive Community Treatment provider contact (OMH CAIRS)
  - Adult Housing/Residential program Information (OMH CAIRS)
  - Suicide attempt (OMH NIMRS)
  - Safety plans/screenings and assessments entered by providers in PSYCKES MyCHOIS
  - IMT and AOT Referral Under Investigation (DOHMH)



# Quality Indicators “Flags”

- PSYCKES identifies clients flagged for quality concerns in order to inform the treating provider or network and to support clinical review and quality improvement
- When a client has an applicable quality flag, the provider is allowed access to that individual’s Clinical Summary
- Examples of current quality flags include:
  - No diabetes monitoring for individuals with diabetes and schizophrenia
  - Low medication adherence for individuals with schizophrenia
  - No follow-up after MH inpatient within 7 days; within 30 days
  - High utilization of inpatient/emergency room, Hospital Readmission
  - HARP Enrolled-Not Assessed for HCBS, Health Home Plus-Eligible, No Health Home Plus Service



# Access to Client Data

# What information about clients is available?

- Aggregate Data
  - My QI Report: view current performance on all quality indicators, including # of clients flagged at network and provider level
  - Statewide Reports: select a quality indicator and review statewide proportions by region, county, plan, network, provider, etc.
  - Recipient Search Reports: build your own reports to identify populations of interest within your network
  - Utilization Reports: support VBP and network data needs
- Individual Client Level Data
  - Available with the appropriate data sharing agreements and/or BHCC Consents in place
  - My QI Report: drill-in to lists of clients who meet criteria for selected quality indicator
  - Recipient Search Reports: view names of clients who meet population search criteria
  - Clinical Summary: access Medicaid and State PC treatment history, up to 5 years

# Access Client Data in PSYCKES

## Data Sharing Agreements

- When there are data sharing agreements in place between the network legal entity (e.g., BHCC, IPA) and their network providers, PSYCKES shares client-level data for those clients who are positive for an applicable Quality Flag
  - This does not include data that has special protections such as SUD, HIV, family planning; consent would be required (next slide)
- To update the list of network providers or the status of a data sharing agreement with a provider, contact the PSYCKES Helpdesk

# Access Client Data in PSYCKES

## BHCC Consent

- The BHCC Patient Information Sharing Consent distributed by OMH is intended to cover data sharing by and among the BHCC and the providers in the BHCC network; it also contains PSYCKES language
- When a network provider checks the box in PSYCKES that a client signed the BHCC Consent for the selected BHCC, PSYCKES will:
  - Grant users at that specific provider agency access to full clinical summary
  - Grant users at the selected BHCC network access to full clinical summary when they use their specialized BHCC PSYCKES Access View
  - **Not** automatically grant users at other provider agencies in the network access to that client's Clinical Summary; each provider agency serving the client has to check this box in their own PSYCKES view (client only has to sign once)
- Access is granted to all available client data for 3 years after the last billed service or until the client withdraws their BHCC consent
- If the client withdraws their BHCC consent the BHCC network will lose their access to the Clinical Summary

# Provider User Enabling BHCC Consent

PHI Access for DOE JANE (F - 57), DOB: 6/12/1962

Why are you allowed to view this data? [About access levels](#)

**The client signed consent**

- Client signed a PSYCKES Consent
- Client signed a BHCC Patient Information Sharing Consent
- Client signed a DOH Health Home Patient Information Sharing Consent

**Provider attests to other reason for access**

- Client gave Verbal PSYCKES Consent
- This is a clinical emergency
- Client is currently served by or being transferred to my facility

[Cancel](#) [Next](#)

Select "Client signed a BHCC Patient Information Sharing Consent"

Select the specific BHCC Consent form the client signed

PHI Access for DOE JANE (F - 57), DOB: 6/12/1962

Which Behavioral Health Care Collaborative Patient Information Sharing Consent form(s) did the client sign?

- Client signed MAIN STREET IPA BHCC Consent Form

Did the client sign a different BHCC Consent form? Contact [psyckes-help@omh.ny.gov](mailto:psyckes-help@omh.ny.gov)

[Previous](#) [Cancel](#) [Next](#)

# My QI Report

# My QI Report

- Tool for managing quality improvement efforts; updated monthly
- Displays quality Indicator Sets and Indicators (measures/flags)
- Eligible Population (Denominator): clients served plus other parameters depending on quality indicator specifications
- Number with QI Flag (Numerator): clients meeting criteria for flag
- % prevalence rate: numerator over denominator; higher % indicates opportunities for improvement, lower is better
- Compare prevalence rates at the statewide, region, county, network, provider, program, and managed care plan
- Filter report by: Program Type, MC Plan, Age
- Reports can be exported to Excel and PDF
- QI Trends Past Year allows you to track prevalence on a quality indicator for a selected network or provider agency

# Understanding My QI Report

- Network Access View:
  - Review your overall network performance on all quality indicators
  - See head-to-head comparisons of providers within your network, identify high volume opportunities for improvement
  - \*Drill down to individual list of client names
  - \*Access client-level Clinical Summary to support treatment review/ planning/ care coordination for high risk clients
- Attribution of Clients to Providers and Networks in PSYCKES:
  - Clients served by provider agency according to Medicaid in past 9 months
  - Providers within the Network are identified when you request PSYCKES Network Access development for your network
- Period of observation for the quality indicator:
  - Depends on that quality measure definition, varies for each measure
  - For example, the period of observation for the High Utilization quality indicator is 13 months

***\*Client names and access to client-level data is only available when your network has legal data sharing agreements in place with that provider***



## MAIN STREET IPA

Quality Indicator Overview As Of 03/01/2023

View: Standard



PDF

Excel

PROGRAM TYPE: ALL MANAGED CARE: ALL MC PRODUCT LINE: ALL AGE: ALL REGION: ALL COUNTY: ALL

Filters

Reset



Indicator Set

## Quality Improvement Indicators (as of 03/01/2023)

Run monthly on all available data as of run date

Name	Population	Eligible Population	# with QI Flag	%	Statewide %	
BH QARR - Improvement Measure	All	2,816	915	32.5	36.1	
General Medical Health	All	19,950	2,431	12.2	12.3	
Health Home Care Management - Adult	Adult 18+	5,723	3,468	60.6	86	
High Utilization - Inpt/ER	All	19,950	5,795	29	21.4	
Polypharmacy	All	4,843	964	19.9	12.2	
Preventable Hospitalization	Adult	19,428	298	1.5	0.8	
Readmission Post-Discharge from any Hospital	All	4,651	961	20.7	11.4	
Readmission Post-Discharge from this Hospital	All	0	0	0	11.4	
Treatment Engagement	Adult 18-64	2,642	945	35.8	33.4	

## Performance Tracking Indicators (as of 08/01/2022)

Run with intentional lag of 6+ months to allow for complete data

Name	Population	Eligible Population	# with QI Flag	%	Statewide %	
MH Performance Tracking Measure	All	3,867	1,993	51.5	52.8	
SUD Performance Tracking Measure	Adol & Adult (13+)	5,444	4,248	78	80.1	
Vital Signs Dashboard - Adult	Adult	8,348	4,262	51.1	47.7	
Vital Signs Dashboard - Child	Child & Adol	638	227	35.6	33.6	

# MAIN STREET IPA

Quality Indicator Overview As Of 03/01/2023

View: Standard

PDF Excel

## QI Filters

Program Type

ALL

Managed Care

- ALL
- ACT - MH Specialty
- CCBHC
- CFTSS - All
- CFTSS - CPST
- CFTSS - Family Peer Support Services (FPSS)
- CFTSS - Family/Youth Peer Support (FPSS/YPS)
- CFTSS - Other Licensed Practitioners (OLP)
- CFTSS - Psychosocial Rehabilitation (PSR)
- CORE Psychosocial Rehabilitation - Education Focus
- CORE or HCBS All
- CORE or HCBS Community Psychiatric Support and Treatment
- CORE or HCBS Empowerment Services - Peer Support
- CORE or HCBS Psychosocial Rehabilitation - Any
- Care Management - Enrolled (Source: DOH MAPP)
- Care Management - Enrolled/Outreach (Source: DOH MAPP)
- Care Management - Outreach (Source: DOH MAPP)
- Childrens HCBS - All
- Childrens HCBS - Caregiver Family Supports and Services
- Childrens HCBS - Community Self-Advocacy Training and Support

MC Product Line

Age

Region

County

ARE ALL	MC PR								
ators (as of 0									
	All								
	All								
	Adult 1								
	All								
	All								
	Adult	26,996	298	1.1	0.8				
	All	4,651	961	20.7	11.4				
	All								

# MAIN STREET IPA

Quality Indicator Overview As Of 03/01/2023

View: Standard



PROGRAM TYPE: ALL MANAGED CARE: ALL MC PRODUCT LINE: ALL AGE: ALL REGION: ALL COUNTY: ALL

[Filters](#) [Reset](#)

Indicator Set

## Quality Improvement Indicators (as of 03/01/2023) Run monthly on all available data as of run date

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Polypharmacy	All	4,843	964	19.9	12.2	
Preventable Hospitalization	Adult	19,428	298	1.5	0.8	
Readmission Post-Discharge from any Hospital	All	4,651	961	20.7	11.4	
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Treatment Engagement	Adult 18-64	2,642	945	35.8	33.4	

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# MAIN STREET IPA

Quality Indicator Overview As Of 03/01/2023

View: Standard

PDF Excel

PROGRAM TYPE: ALL MANAGED CARE: ALL MC PRODUCT LINE: ALL AGE: ALL REGION: ALL COUNTY: ALL

Filters Revert

Indicator Set: BH QARR - Improvement Measure

Indicator Set **Indicator**

Name	Population	Eligible Population	# with QI Flag	%	Statewide %	25% 50% 75% 100%
1. Adherence - Antipsychotic (Schiz)	Adult 18-64	1,261	438	34.7	29.2	
2. Discontinuation - Antidepressant <12 weeks (MDE)	Adult 18-64	357	172	48.2	41.2	
3. No Metabolic Monitoring (Gluc/HbA1c and LDL-C) on Antipsychotic	Child	19	11	57.9	64.3	
4. No Diabetes Screening (Gluc/HbA1c) Schiz or Bipolar on Antipsychotic	Adult 18-64	1,583	191	12.1	24.5	
5. Antipsychotic Polypharmacy (2+ >90days) Children	Child	12	0	0	4.4	
6. No Diabetes Monitoring (HbA1c and LDL-C) Diabetes and Schiz	Adult 18-64	388	81	20.9	33.6	
7. Readmission (30d) from any Hosp: MH to MH	All	892	140	15.7	11.3	
BH QARR - 2020 Quality Incentive Subset Summary (1-4)	All	2,321	758	32.7	40.9	
BH QARR - 2020 Total Indicator Summary (1-7)	All	2,816	915	32.5	36.1	





### MAIN STREET IPA

Quality Indicator Overview As Of 03/01/2023

View: Standard ▾



PROGRAM TYPE: ALL MANAGED CARE: ALL MC PRODUCT LINE: ALL AGE: ALL REGION: ALL COUNTY: ALL Filters Reset

Indicator Set: BH QARR - Improvement Measure Indicator: 4. No Diabetes Screening (Gluc/HbA1c) Schiz or Bipolar on Antipsychotic

Indicator Set	Indicator	<b>Provider</b>
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Provider Facility Name	Eligible Population	# with QI Flag	%
NYU LANGONE HOSPITALS	1,486	190	12.8
HOUSING WORKS E NY HIV 3 AADC	297	37	12.5
ARGUS COMMUNITY, INC.	223	31	13.9
HOUSING WORKS, INC.	333	27	8.1
BRIDGING ACCESS TO CARE, INC.	88	19	21.6
CAMBA, INC.	93	19	20.4
COMMUNITY HEALTH PROJECT, INC.	186	17	9.1
NATIONAL ASSOCIATION ON DRUG ABUSE PROBLEMS	79	11	13.9
AIDS SERVICE CENTER OF LOWER MANHATTAN, INC	81	10	12.3
HOUSING WORKS SVC II AADC	156	10	6.4
UPPER ROOM AIDS MINISTRY, INC: ADHC	80	10	12.5
BAILEY HOUSE, INC.	44	7	15.9
FAMILY SERVICES NETWORK NY, INC	54	7	12.8

### MENTAL HEALTH CLINIC

Quality Indicator Overview As Of 03/01/2023

View: Standard

PDF Excel

REGION: ALL COUNTY: ALL SITE: ALL PROGRAM TYPE: ALL AGE: ALL MC PRODUCT LINE: ALL MANAGED CARE: ALL Filters Reset

Indicator Set: BH QARR - Improvement Measure Indicator: 4. No Diabetes Screening (Gluc/HbA1c) Schiz or Bipolar on Antipsychotic

Indicator Set	Indicator	Site	HH/CM Site(s)	MCO	Attending	Recipients	New QI Flag	Dropped QI Flag
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Recipient	Medicaid ID	DOB	Race & Ethnicity	Quality Flags	Most Recent BH Outpatient Attending	Clinical Summary Last Viewed
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QUnVUaZBTEa UaVFTUFI	SqeoM96vOEI	MDMIM9MIMTauOQ	White	Adher-AP (DOH), HARP No Assessment for HCBS, HARP No Health Home, High MH Need, No DM Screen - AP, No Gluc/HbA1c & LDL-C - AP, No Gluc/HbA1c - AP	None Identified	No
REFMVEzO VE7PTUFT	VaemM9MuOFM	MDUIM9UIMTasNA	White	Colorectal Screen Overdue (DOH), HARP No Assessment for HCBS, No DM Screen - AP, No DM Screen - AP (DOH), No Gluc/HbA1c & LDL-C - AP, No Gluc/HbA1c - AP, No LDL-C - AP, No Outpt Medical	None Identified	No
				4PP(A), No DM Screen - AP, No Gluc/HbA1c & LDL-C - AP		



# QI Trends Past Year

Select Organization, Indicator Set and Indicator  
Select additional filters (optional)



Office of Mental Health | PSYCKES

De-identify

Settings ▾

Log Off

My QI Report ▾

Statewide Reports

Recipient Search

Provider Search

Usage Reports ▾

Utilization Reports

My QI Report

QI Trends Past Year

## QI Trends Past Year

Select organization, indicator set, and indicator

Organization: Provider, Network, Plan

MAIN STREET IPA ▾

Indicator Set

BH QARR - Improvement Measure ▾

Indicator

4. No Diabetes Screening (Gluc/HbA1c) Schiz or Bipola... ▾

Modify filters (optional)

Program Type

ALL ▾

Age Group

ALL ▾

Managed Care

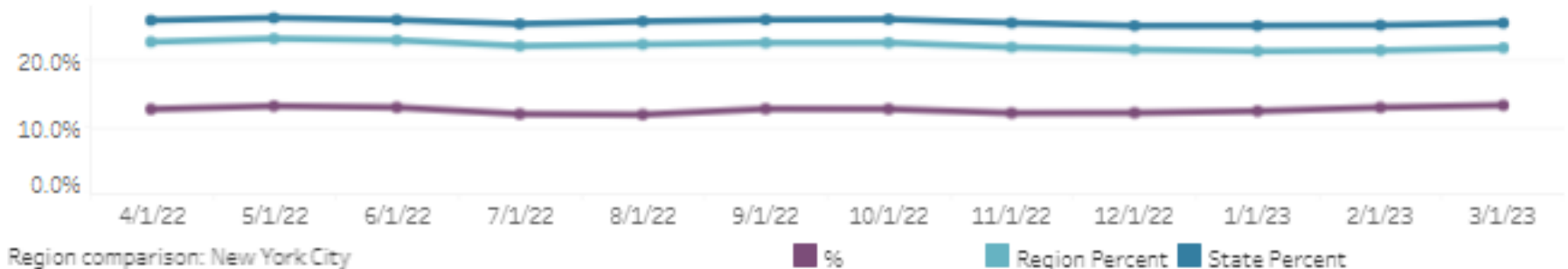
ALL ▾

MC Product Line

ALL ▾



# QI Trends Past Year



4. No Diabetes Screening (Gluc/HbA1c) Schiz or Bipolar on Antipsychotic: The percentage of adults 18-64 years with a diagnosis of schizophrenia or Bipolar Disorder with any oral or injectable antipsychotic medication during the previous 13 months, who did not have either an HbA1c or blood glucose test in the past 12 months.

	Eligible Population	# with QI flag	%	Region Percent	State Percent
4/1/22	3,226	407	12.6%	22.5%	25.6%
5/1/22	3,166	414	13.1%	22.9%	26.0%
6/1/22	3,176	409	12.9%	22.7%	25.7%
7/1/22	3,182	379	11.9%	21.9%	25.1%
8/1/22	3,112	368	11.8%	22.1%	25.5%
9/1/22	3,025	383	12.7%	22.3%	25.7%
10/1/22	3,023	382	12.6%	22.3%	25.8%
11/1/22	3,013	363	12.0%	21.7%	25.3%
12/1/22	3,046	368	12.1%	21.3%	24.8%
1/1/23	3,015	372	12.3%	21.1%	24.8%
2/1/23	2,945	379	12.9%	21.2%	24.9%
3/1/23	1,615	213	13.2%	21.6%	25.2%



# Recipient Search

# Recipient Search

- Tool for population health management and oversight
- Automatic attribution is clients billed by one or more network provider in past 12 months; attribution time period can be modified
- Build your own population searches, can search by:
  - Demographics
  - High need characteristics
  - Medications received
  - Medical or behavioral health diagnoses
  - Services received by specific provider or any provider
- Search results report shows count and unique identifiers of individuals
- Export results page to Excel or PDF
- Advanced search results “Views” provide more information in bulk
  - Care Coordination, High Need/High Risk, Hospital Utilization, Outpatient Providers



## Recipient Search

Limit results to

50

Search

Reset

### Recipient Identifiers

Medicaid ID

SSN

First Name

Last Name

DOB

AB00000A

MM/DD/YYYY

### Characteristics as of 04/17/2023

Age Range  To  Gender

Race

Ethnicity

Region

County

Population

High Need Population

AOT Status

Alerts

Homelessness Alerts

### Managed Care Plan & Medicaid

Managed Care

MC Product Line

Medicaid Enrollment Status

Medicaid Restrictions

Children's Waiver Status

HARP Status

HARP HCBS Assessment Status

HARP HCBS Assessment Results

- HARP Enrolled - Not Health Home Enrolled - (updated weekly)
- HARP-Enrolled - No Assessment for HCBS - (updated weekly)
- Eligible for Health Home Plus - Not Health Home Enrolled
- Eligible for Health Home Plus - No Health Home Plus Service Past 12 Months
- Eligible for Health Home Plus - No Health Home Plus Service Past 3 Months
- HH Enrolled, Eligible for Health Home Plus - Not Entered as Eligible in DOH MAPP Past 3 Months
- High Mental Health Need
- Antipsychotic Polypharmacy (2+ >90days) Children
- Antipsychotic Two Plus
- Antipsychotic Three Plus
- Antidepressant Two Plus - SC
- Antidepressant Three Plus
- Psychotropics Three Plus
- Psychotropics Four Plus
- Polypharmacy Summary
- Discontinuation - Antidepressant <12 weeks (MDE)
- Adherence - Mood Stabilizer (Bipolar)
- Adherence - Antipsychotic (Schiz)
- Treatment Engagement - Summary
- No Metabolic Monitoring (Gluc/HbA1c and LDL-C) on Antipsychotic (All)

Provider:

Region:

County:

Current Access:

Service Utilization:

Number of Visits:

Service Setting:

- Care Coordination
- Inpatient - ER
- Living Support/Residential
- Other
- Outpatient - DD
- Outpatient - MH
- Outpatient - Medical
- Outpatient - Medical Specialty

Service Detail: Selected

Prescriber Last Name:

Drug Name:   Active Drug

Active medication (past 3 months) requiring Prior Authorization

Psychotropic Drug Class\*

- ADHD Med
- Antidepressant
- Antipsychotic
- Antipsychotic - Long Acting Injectat

Non-Psychotropic Drug Class\*

- Analgesics and Anesthetics
- Anti-Infective Agents
- Anti-Obesity Agents
- Antidiabetic

Diagnosis:

Diagnosis given:   Primary Only  Primary/Secondary

BH Diagnosis

- Any BH Diagnosis
- Any MH Diagnosis
- Anxiety Disorders
- Bipolar and Related Disorders

Medical Diagnosis

- Certain conditions originating in the peri
- Certain infectious and parasitic disease
- Congenital malformations, deformations
- Diseases of the blood and blood-forming

Provider:

Region:

County:

Service Utilization:

Number of Visits:

Service Setting:

- Care Coordination
- Crisis Service
- Foster Care
- Inpatient - ER
- Living Support/Residential
- Other
- Outpatient - DD
- Outpatient - MH
- Outpatient - Medical
- Outpatient - Medical Specialty
- Outpatient - SU

Service Detail: Selected

--- Recipient Related data is refreshed weekly and all other sections are refreshed monthly.  
 --- Search uses "OR" criteria within a list and "AND" criteria between lists.  
 --- \*To select multiple options within a list, hold down "CTRL" while making additional selections.

**Characteristics** as of 04/17/2023

Age Range  To  Gender   
Race   
Ethnicity   
Region   
County

Population   
High Need Population



- AOT Status
- Alerts
- Homelessness Alerts
- CORE Eligible (Community Oriented Recovery and Empowerment)
  - POP : High User (All)
  - POP : High User (New)
  - POP : Potential Clozapine Candidate (All)
  - POP : Potential Clozapine Candidate (New)
  - High Medicaid Inpatient/ER Cost (Non-Duals) - Top 1%
  - High Medicaid Inpatient/ER Cost (Non-Duals) - Top 5%
  - OnTrackNY Early Psychosis Program : Enrolled
  - OnTrackNY Early Psychosis Program : Discharged < 3 years
  - OnTrackNY Early Psychosis Program : Enrolled or Discharged < 3 years
  - Transition Age Youth - Behavioral Health (TAY-BH)
  - OPWDD NYSTART - Eligible
  - Health Home Plus (HH+) - Eligible
  - HH+ Service - Received at least once in past 3 mo. (Source: DOH MAPP)
  - AOT - Active Court Order
  - AOT - Expired < 12 months
  - ACT - Enrolled
  - ACT - Discharged < 12 months
  - 3+ Inpt MH < 12 months

**Managed Care Plan & Medicaid**

Managed Care   
MC Product Line   
Medicaid Enrollment Status   
Medicaid Restrictions

Children's Waiver Status

HARP Status

HARP HCBS Assessment Status

HARP HCBS Assessment Results

Quality Flag as of 04/01/2023

[Definitions](#)

Services: Specific Provider as of 04/

Quality Flag as of 03/01/2023

 [Definitions](#)

HARP Enrolled - Not Health Home Enrolled - (updated weekly)  
HARP-Enrolled - No Assessment for HCBS - (updated weekly)  
Eligible for Health Home Plus - Not Health Home Enrolled  
Eligible for Health Home Plus - No Health Home Plus Service Past 12 Months  
Eligible for Health Home Plus - No Health Home Plus Service Past 3 Months  
HH Enrolled, Eligible for Health Home Plus - Not Entered as Eligible in DOH MAPP Past 3 Months  
High Mental Health Need  
Antipsychotic Polypharmacy (2+ >90days) Children  
Antipsychotic Two Plus  
Antipsychotic Three Plus  
Antidepressant Two Plus - SC  
Antidepressant Three Plus  
Psychotropics Three Plus  
Psychotropics Four Plus  
Polypharmacy Summary  
Discontinuation - Antidepressant <12 weeks (MDE)  
Adherence - Mood Stabilizer (Bipolar)  
Adherence - Antipsychotic (Schiz)  
Treatment Engagement - Summary  
No Metabolic Monitoring (Gluc/HbA1c and LDL-C) on Antipsychotic (All)  
No Metabolic Monitoring (Gluc/HbA1c and LDL-C) on Antipsychotic (Child)

# Medication & Diagnosis as of 03/01/2023

Past 1 Year 

Prescriber Last Name

Drug Name

Active Drug

Psychotropic Drug Class\*

- ADHD Med
- Antidepressant
- Antipsychotic
- Antipsychotic - Long Acting Injectab

Non-Psychotropic Drug Class\*

- Analgesics and Anesthetics
- Anti-Infective Agents
- Anti-Obesity Agents
- Antidiabetic

Diagnosis

Diagnosis given

Primary Only

Primary/Secondary

BH Diagnosis

- Any BH Diagnosis
- Any MH Diagnosis
- + Anxiety Disorders
- + Bipolar and Related Disorders

Medical Diagnosis

- + Certain conditions originating in the peri
- + Certain infectious and parasitic diseases
- + Congenital malformations, deformations
- + Diseases of the blood and blood-forminc

Services: Specific Provider as of 03/01/2023

Past 1 Year

Provider

MAIN STREET IPA

Region



County



Current Access



Service Utilization



Number of Visits



Service Setting:

- + - Care Coordination
- + - Inpatient - ER
- + - Living Support/Residential
- + - Other
- + - Outpatient - DD
- + - Outpatient - MH
- + - Outpatient - Medical
- + - Outpatient - Medical Specialty

Service Detail: Selected

Empty box for service details.



## Services by Any Provider as of 03/01/2023

Past 1 Year ▼

Provider

Region

County

Service Utilization

Number of Visits

Service Setting:

- + - Care Coordination ▲
- + - Crisis Service
- + - Foster Care
- + - Inpatient - ER
- + - Living Support/Residential
- + - Other
- + - Outpatient - DD
- + - Outpatient - MH
- + - Outpatient - Medical
- + - Outpatient - Medical Specialty
- + - Outpatient - SU ▼

◀   ▶

Service Detail: Selected

[← Modify Search](#)**42 Recipients Found**View: 

BH Diagnosis

Bipolar and Related Disorders

AND [Provider Specific] Provider

MAIN STREET IPA

AND [Provider Specific] Service Utilization

Inpatient - ALL (3+ Visits)

Maximum Number of Rows Displayed: 50

Name ▲	Medicaid ID ⇅	DOB ⇅	Gender ⇅	Medicaid Quality Flags ⇅	Medicaid Managed Care Plan ⇅	Current PHI Access ⇅
QabBTa3P SzFTEnF	Rb6sMT6u MV2	OSyoMCyn OT6q	R6 LQ Mp6	2+ ER-BH, 2+ ER-Medical, 2+ Inpt-BH, 2+ Inpt-MH, 4+ Inpt/ER-BH, 4PP(A), Adher-AP (DOH), Adher-MS (DOH), HARP No Assessment for HCBS, High MH Need, No Gluc/HbA1c & LDL-C - AP, No LDL-C - AP, Readmit 30d - BH to BH, Readmit 30d - MH to All Cause	Fidelis Care New York	Quality Flag
QanBQqXRUnM QqFUSEVSSUvF RQ	RUIqOTAnM ai	N8yoLpEvO TE	R6 LQ MpE	2+ Inpt-BH, 2+ Inpt-MH, 4+ Inpt/ER-BH, 4+ Inpt/ER-MH, Adher-AP, Adher-AP (DOH), Adher-MS, Adher-MS (DOH), HARP No Assessment for HCBS, HARP No Health Home, HHPlus No HHPlus Service > 3 mos, HHPlus Not HH Enrolled, High MH Need, No DM Screen - AP, No Gluc/HbA1c & LDL-C - AP, No Gluc/HbA1c - AP, No LDL-C - AP, No MH Inpt F/U 30d (DOH), No MH Inpt F/U 30d (DOH) - Adult, No MH Inpt F/U 7d (DOH), No MH Inpt F/U 7d (DOH) - Adult, No Outpt Medical, POP Cloz Candidate, POP High User, Readmit 30d - BH to BH, Readmit 30d - MH to MH, Readmit 30d - MH to MH - Adult, Readmit 30d - Medical to All Cause	Fidelis Care New York	Quality Flag
QanBSqU UqFNQUvUSEE TA	QqUrNDEoO EY	OCynOCynO T6v	R6 LQ MpM	2+ ER-Medical, 2+ Inpt-Medical, 4+ Inpt/ER-Med, HHPlus No HHPlus Service > 3 mos, HHPlus Not HH Enrolled, PQI 92 (DOH), PrevHosp-DM, Readmit 30d - Medical to Medical		Quality Flag
QazNQaFSRA REbBTAu TQ	QUupNpam MrE	OSypMCyn OTUt	R6 LQ N9U	2+ ER-BH, 2+ ER-MH, 2+ ER-Medical, 2+ Inpt-BH, 2+ Inpt-MH, 4+ Inpt/ER-BH, 4+ Inpt/ER-MH, HARP No Assessment for HCBS, High MH Need, POP Cloz Candidate, POP High User, Readmit 30d - BH to BH, Readmit 30d - MH to MH, Readmit 30d - MH to MH - Adult	Fidelis Care New York	Quality Flag
QqFSUEVOVEVS VE7FUaVTQQ TQ	Qa2vM96oN Fe	OSyoN8ynO TYt	R6 LQ NTU	2+ ER-Medical, 2+ Inpt-Medical, 4+ Inpt/ER-Med, High MH Need, POP High User, Readmit 30d - Medical to Medical	CDPHP	Quality Flag
QqFTUqbEWQ SrJJUrRPUE7FUbl	REMtNDAq NFY	NSypLpEvO Ta	TQ LQ M9M	2+ ER-Medical, 2+ Inpt-BH, 2+ Inpt-MH, 4+ Inpt/ER-BH, 4+ Inpt/ER-MH, Adher-MS, High MH Need, POP High User, Readmit 30d - BH to BH, Readmit 30d - MH to MH, Readmit 30d - MH to MH - Adult	Fidelis Care New York	Quality Flag

# 42 Recipients Found

View: Care Coordination



Modify Search

BH Diagnosis: Bipolar and Related Disorders  
AND [Provider Specific] Provider: MAIN STREET IPA  
AND [Provider Specific] Service Utilization: Inpatient - ALL (3+ Visits)

Maximum Number of Rows Displayed: 50

Name	Product Line	Current PHI Access	HARP Status (H Code)	CORE Eligible	HARP HCBS Assessment Date (m recent)
QabBTa3P SazFTEnF	Recovery Plan (HARP)	Quality Flag	HARP Enrolled (H1)	Yes	
QanBQqjXRUnM QqFUSEVSSUvF RQ	Recovery Plan (HARP)	Quality Flag	HARP Enrolled (H1)	Yes	
QanBSqU UqFNQUvUSEE TA		Quality Flag			
QazNQaFSRA REbBTaU TQ	Recovery Plan (HARP)	Quality Flag	HARP Enrolled (H1)	Yes	
QqFSUEVOVEVS VE7FUaVTQQ TQ		Quality Flag			
QqFTUqbEWQ SrJJUrRPUE7FUbl		Quality Flag	Eligible Pending Enrollment (H9)		
Qq7BRqvPT6 QVJJRUM		Quality Flag	Eligible Pending Enrollment (H9)		
Qq7JVUrFTbRP SaFTTqu QQ	Recovery Plan (HARP)	Quality Flag	HARP Enrolled (H1)	Yes	
QqbSQUJJUqa SaVTUqbDDQQ	Recovery Plan (HARP)	Quality	HARP Enrolled (H1)	Yes	
QqnBRaZFWQ RfBmQUu S6		Quality			
QqzSRVbNQVNUUabBTa vJ VaVSQQ Vm	Recovery Plan (HARP)	Quality Flag	HARP Enrolled (H1)	Yes	

**CLICK HERE TO SCROLL**

# 42 Recipients Found

View: Care Coordination



Modify Search

BH Diagnosis: Bipolar and Related Disorders

AND [Provider Specific] Provider: MAIN STREET IPA

AND [Provider Specific] Service Utilization: Inpatient - ALL (3+ Visits)

Maximum Number of Rows Displayed: 50

Name	HARP HCBS Assessment Date (most recent)	Children's Waiver Status (K Code)	Health Home Name (Enrolled)	Care Management Name (Enrolled)
QqbSQUJJuq SaVTUqbDQq			ADIRONDACK HEALTH INSTITUTE INC	CATHOLIC CHARITIES/ALBANY AI
QqnBRaZFWQ RFbMQUuS6			CHHUNY LLC	BEHAVIORAL HLTH SVCS NORTH IN
QqzSRVbNQVNUUabBTa vJ VaVSQQ Vm			ADIRONDACK HEALTH INSTITUTE INC	GLENS FALLS HOSPITAL
RqFSUazX SaFNRM U6	7/11/2022			
RqFURVM SqFZTEVF TA	5/7/2021			
RqVPUa3J RVJJQm Sm				
RrJFRUu SEFSUabT QQ				
RrJFRUvP SaFNRM				
SEFNTUzORA REzOQUne R6				
SEFZRV TUbDSEVMTEU	8/30/2022		ADIRONDACK HEALTH INSTITUTE	BEHAVIORAL HLTH SVCS NORTH IN
SEbMTA QVVEUaVZ TQ	9/25/2020		ADIRONDACK HEALTH INSTITUTE INC	AIDS COUNCIL OF NENY AI

**CLICK HERE TO SCROLL**

# 42 Recipients Found

View: Care Coordination



Modify Search

BH Diagnosis

Bipolar and Related Disorders

AND [Provider Specific] Provider

MAIN STREET IPA

AND [Provider Specific] Service Utilization

Inpatient - ALL (3+ Visits)

Maximum Number of Rows Displayed: 50

Name	ACT Provider (Active)	OnTrackNY Early Psychosis Program (Enrolled)	AOT Status	AOT Provider (Active)
QabBTa3P SzFTEnF				
QanBQqjXRUnM QqFUSEVSSUvF RQ				
QanBSqU UqFNQUvUSEE TA				
QazNQaFSRA REbBTaU TQ				
QqFSUEVOVEVS VE7FUaVTQQ TQ				
QqFTUqbEWQ SrJJUrPUE7FUbl				
Qq7BRqvPT6 QVJJRUm				
Qq7JVUrFTbRP SaFTTqu QQ				
QqbSQUJJUqa SaVTUqbDQQ				
QqnBRaZFWQ RFbMQUu S6				
QqzSRVbNQVNUUebBTa vJ VaVSQQ Vm				

# 42 Recipients Found

View: Hospital Utilization



Modify Search


BH Diagnosis	Bipolar and Related Disorders
AND [Provider Specific] Provider	MAIN STREET IPA
AND [Provider Specific] Service Utilization	Inpatient - ALL (3+ Visits)

Maximum Number of Rows Displayed: 50

Applicable data is displayed for recipients with quality flag or consent.

Name	Medicaid ID	DOB	Gender	Medicaid Managed Care Plan	Current PHI Access	# ER Services Past Yr			# Inpatient Services Past Yr		
						ALL	Behavioral Health	Medical	ALL	Behavioral Health	Medical
QabBTa3P SazFTEnF	Rb6sMT6u MV2	OSyoMCyn OT6q	R6 LQ Mp6	Fidelis Care New York	Quality Flag	4	2	2	6	6	
QanBQqjXRUnM QqFUSEVSSUvF RQ	RUlqOTAn Mai	N8yoLpEvO TE	R6 LQ MpE	Fidelis Care New York	Quality Flag				15	14	1
QanBSqU UqFNQUvUSEE TA	QqUrNDEoO EY	OCynOCynO T6v	R6 LQ MpM		Quality Flag	3		3	5		5
QazNQaFSRA REbBTaU TQ	QUupNpam MrE	OSypMCyn OTUt	R6 LQ N9U	Fidelis Care New York	Quality Flag	5	2	3	5	5	
QqFSUEVOVEVS VE7FUaVTQQ TQ	Qa2vM96o NFe	OSyoN8ynO TYt	R6 LQ NTU	CDPHP	Quality Flag	6		6	5		5
QqFTUqbEWQ SrJJUrPUE7FUbl	REMtNDAq NFY	NSypLpEvO Ta	TQ LQ M9M	Fidelis Care New York	Quality Flag	2		2	4	4	
Qq7BRqvPT6 QVJJRum	QqeuODMq MVQ	NoypLpEvO TI	R6 LQ MpA	Fidelis Care New York	Quality Flag	9	5	4	3	1	2
Qq7JVUrFTbRP SaFTTqu QQ	QqUnNDYs NbA	MoynN8yn OT2o	TQ LQ NTE	Fidelis Care New York	Quality Flag	1	1		6	6	
QqbSQUJJuqa SaVTUqbDDQQ	RbMtNpMu NFM	MTEIMTaim TauN6	R6 LQ MpY	CDPHP	Quality Flag	19	5	14	8	8	

## 42 Recipients Found

View: Outpatient Providers 

- Standard
- Care Coordination
- High Need/High Risk
- Hospital Utilization
- Outpatient Providers**



BH Diagnosis	Bipolar and Related Disorders
AND [Provider Specific] Provider	MAIN STREET IPA
AND [Provider Specific] Service Utilization	Inpatient - ALL (3+ Visits)

Maximum Number of Rows Displayed: 50

Applicable data is displayed for recipients with quality flag or consent.

Name	Medicaid ID	DOB	Gender	Medicaid Managed Care Plan	Current PHI Access	Primary Care Physician Assignment(Assigned by MC Plan)		
						Name	Most Recent Service Past 1 yr	# Visits with Assigned PCP past 1 yr
<a href="#">QabBTa3P SezFTEnF</a>	Rb6aMT6u MV2	OSyoMCyn OT6q	R6 LQ Mp6	Fidelis Care New York	Quality Flag			
<a href="#">QanBQqjXRUnM QqFUSEVSSUvF RQ</a>	RUIqOTAnM ai	N8yoLpEvO TE	R6 LQ MpE	Fidelis Care New York	Quality Flag			
<a href="#">QanBSqU UqFNQUvUSEE TA</a>	QqUrNDEoO EY	OCynOCynO T6v	R6 LQ MpM		Quality Flag			
<a href="#">QazNQaFSRA RebBTaU TQ</a>	QUupNpam MrE	OSypMCyn OTUt	R6 LQ N9U	Fidelis Care New York	Quality Flag			
<a href="#">QqFSUEVOVEVS VE7FuVTQQ TQ</a>	Qa2vM96oN Fe	OSyoN8ynO TYt	R6 LQ NTU	CDPHP	Quality Flag	FOOTE, DAVID		
<a href="#">QqFTUqbEWQ SrJJUrRPUE7FUbI</a>	REMtNDAq NFY	NSypLpEvO Ta	TQ LQ M9M	Fidelis Care New York	Quality Flag			
<a href="#">Qq7BRqvPT6 QVJJRUm</a>			R6 LQ MpA	Fidelis Care New York	Quality Flag			
<a href="#">Qq7JVUrFTbRP SaFTTq QQ</a>			TQ LQ NTE	Fidelis Care New York	Quality Flag			

**CLICK HERE TO SCROLL**

[← Modify Search](#)**42 Recipients Found**View: Outpatient Providers

BH Diagnosis

Bipolar and Related Disorders

AND [Provider Specific] Provider

MAIN STREET IPA

AND [Provider Specific] Service Utilization

Inpatient - ALL (3+ Visits)

Maximum Number of Rows Displayed: 50

Applicable data is displayed for recipients with quality flag or consent.

Name	Mental Health Outpatient Provider	Medical Outpatient Provider			Most Recent Facility Name			
		Most Recent Provider Facility Name	Most Recent Service Past 1 yr	# Services this Provider Past 1 yr		Most Recent Provider Facility Name	Most Recent Service Past 1 yr	# Services this Provider Past 1 yr
QabBTa3P SezFTEnF					WARRENSBURG HEALTH CENTER	2/28/2023	1	
QanBQqjXRUnM QqFUeVSSUvF RQ	BEHAVIORAL HEALTH SERVICES NORTH, INC.	6/7/2022	1		WARRENSBURG HEALTH CENTER	6/18/2022	1	
QanBSqU UqFNQuvUsee TA	BEHAVIORAL HEALTH SERVICES NORTH, INC.	6/14/2022	2		WARRENSBURG HEALTH CENTER	6/2/2022	3	
QazNQaFSRA RebBTaU TQ	ESSEX COUNTY COMMUNITY SERVICES BOARD	2/15/2023	35		ELIZABETHTOWN COMMUNITY HSP	12/29/2022	13	MENTAL HE ASSOCIATIO ESSEX COU
QqFSUEVOVEVS VE7FUaVTQQ TQ					WARRENSBURG HEALTH CENTER	2/17/2023	3	
QqFTUqbEWQ SrJJUrRPUE7FUbl	BEHAVIORAL HEALTH SERVICES NORTH, INC.	11/29/2022	4		COMM MHC GLEN MH	2/17/2023	11	
Qq7BRqvPT6 QVJJRum	BEHAVIORAL HEALTH SERVICES NORTH, INC.	6/16/2022			PLAIN Y CIANS H	1/10/2023	6	
Qq7JVUrFTbRP SaFTTqu QQ					COMM MHC GLEN FALLS MH	1/17/2023	4	
	SARATOGA COUNTY							

**CLICK HERE TO  
SCROLL**





[← Modify Search](#)**42 Recipients Found**View: Outpatient Providers

BH Diagnosis

Bipolar and Related Disorders

AND [Provider Specific] Provider

MAIN STREET IPA

AND [Provider Specific] Service Utilization

Inpatient - ALL (3+ Visits)

Maximum Number of Rows Displayed: 50

Applicable data is displayed for recipients with quality flag or consent.

Name	Medical Outpatient Provider			CORE or Adult HCBS Service Provider			
	Most Recent Provider Facility Name	Most Recent Service Past 1 yr	# Services this Provider Past 1 yr	Most Recent Provider Facility Name	Most Recent Service Type Past 1 yr	Most Recent Service Past 1 yr	# Services this Provider Past 1 yr
QabBTa3P SezFTEnF	WARRENSBURG ALTH CENTER	2/28/2023	1				
QanBQqjXRUnM QqFUSEVSSUvF RQ	WARRENSBURG ALTH CENTER	6/18/2022	1				
QanBSqU UqFNQUvUUSEE TA	WARRENSBURG ALTH CENTER	6/2/2022	3				
QazNQaFSRA REbBTaU TQ	IZABETHTOWN COMMUNITY HSP	12/29/2022	13	MENTAL HEALTH ASSOCIATION IN ESSEX COUNTY	CORE or HCBS Empowerment Services - Peer Support	1/25/2023	4
QqFSUEVOVEVS VE7FUaVTQQ TQ	WARRENSBURG ALTH CENTER	2/17/2023	3				
QqFTUqbEWQ SrJJUrRPUE7FUbl	MM MHC GLEN LLS MH	2/17/2023	11				
Qq7BRqvPT6 QVJJRUm	AMPLAIN LLEY PSYCIANS H	1/10/2023	6				
Qq7JVUrFTbRP SaFTTqu QQ	MM MHC GLEN LLS MH	1/17/2023	4				

# Clinical Summary

# What is a PSYCKES Clinical Summary?

- Up to 5 years of information on:
  - MC Plan, MC Plan Assigned PCP, Plan Product Line, HARP Status, HARP HCBS Assessment Status, Health Home, ACT, AOT, homelessness
  - Medical and behavioral health diagnoses
  - Medical and psychotropic medications
  - Outpatient and inpatient services
  - Housing and residential services (those paid for by Medicaid as well as housing programs with OMH oversight)
  - Lab, radiology, vision, dental, medical equipment, transportation
- View client-level Clinical Summary for clients who were served by a provider in your network with which you have a data sharing agreement and the client has:
  - Quality Flag - access to Clinical Summary, not including enhanced PHI
  - Signed BHCC consent form - access to full Clinical Summary, including enhanced PHI (Substance use, HIV information, genetic testing, family planning, safety plans)

# How to look up a Client's Clinical Summary

- Recipient Search tab
- Enter one of the following:
  - Medicaid ID, or
  - Social Security Number, or
  - Name + Date of Birth
- PSYCKES will search database- if client found, will display:
  - 1 client if Medicaid ID or SS# was entered
  - Multiple potential matches if name + DOB entered
- Check access status to see what client-level data the network is eligible to view

# Recipient Search

Limit results to

50 ▾

Search

Reset

Individual Search

## Recipient Identifiers

Search in:  Full Database  MAIN STREET IPA

Medicaid ID

SSN

First Name

Last Name

DOB

AB00000A

MM/DD/YYYY



Office of Mental Health

PSYCKES

De-identify

Settings ▾

Log Off

← Modify Search

## 1 Recipients Found

PDF Excel

Medicaid ID

ABCD1234

AND [Provider Specific] Provider

MAIN STREET IPA

Maximum Number of Rows Displayed: 50

Name ▲	Medicaid ID ▾	DOB ▾	Gender ▾	Medicaid Quality Flags ▾	Medicaid Managed Care Plan ▾	Current PHI Access ▾
JONES SUE	ABCD1234	6/30/1961	F - 59	2+ ER-Medical, 2+ Inpt-BH, 2+ Inpt-Medical, 4+ Inpt/ER-Med, Adher-AD <12wks, Adher-MS, HARP No Health Home, HHPlus No HHPlus Service, HHPlus No Health Home, No HbA1c & LDL-C (DM & Schiz), No HbA1c-DM, POP Cloz Candidate, POP High User, PrevHosp-All, PrevHosp-DM, Readmit 30d - BH to All Cause, Readmit 30d - Medical to Medical	Fidelis Care New York	PSYCKES Consent



Office of Mental Health



About included data sources

Brief Overview

1 Year Summary

5 Year Summary

This report does not contain clinical data with special protection - consent required.

DOB: OSyoOCynOT2t (NDU Yra)  
Address: NpQ RaVSUba UrQi VFJPWSm Tbai MTInODA

Medicaid ID: QaUoNDEvNba Medicare: No  
Managed Care Plan: Fidelis Care New York (HARP)  
MC Plan Assigned PCP: Duckett, Adam

HARP Status: HARP Enrolled (H1)  
HARP HCBS Assessment Status: Never Assessed  
Medicaid Eligibility Expires on:

**Current Care Coordination**

<b>OMH Unsuccessful Discharge</b>	This individual is being sought by Hutchings Psychiatric Center for re-engagement in outpatient services, please contact the Office of Mental Health Sustained Engagement Support Team at (844) 206 - 1796
<b>POP High User</b>	In the event of emergency department/inpatient hospitalizations, client is eligible for intensive care transition services. To coordinate contact: Fidelis Care New York - Behavioral Health High Risk Alert Team: 718-896-6500 ext. 16077 for HARP members ext. 16072 for Non-HARP members (see HARP status above), BHHHighRisk@fideliscare.org
<b>Health Home Plus Eligibility</b>	This client is eligible for Health Home Plus due to: 3+ Inpt MH < 12 months, 4+ ER MH < 12 months
<b>High Mental Health Need due to:</b>	1+ ER or Inpatient past 12 months with suicide attempt, suicide ideation, or self-harm diagnosis ; 1+ Inpt MH in past 12 months ; AOT active or expired in past 5 years
<b>CORE Eligibility</b>	This client is eligible for Community Oriented Recovery and Empowerment (CORE) services. For more information on CORE, visit: <a href="https://omh.ny.gov/omhweb/bho/core">https://omh.ny.gov/omhweb/bho/core</a>
<b>Medicaid Eligibility Alert</b>	This client uses the New York State of Health (NYSoH) enrollment system for Medicaid recertification • For more information contact NYSoH at 1-855-355-5777.

**Alerts • all available**

**Most Recent**

<b>129</b>	<b>Suicidal Ideation</b> (65 Inpatient, 63 ER, 13 Other)	10/9/2022	UNIVERSITY HSP SUNY HLTH SC (Inpatient - MH)
<b>17</b>	<b>Self inflicted Poisoning</b> (7 Inpatient, 11 ER, 5 Other)	11/26/2021	CROUSE HOSPITAL (Inpatient - Medical)
<b>2</b>	<b>Self inflicted Harm/Injury</b> (1 Inpatient, 1 ER)	5/26/2021	UNIVERSITY HSP SUNY HLTH SC (Inpatient - MH)

**Social Determinants of Health (SDH) Past Year**

<b>Problems related to employment and unemployment</b>	Unemployment, Unspecified
<b>Problems related to housing and economic circumstances</b>	Homelessness Unspecified

**Active Quality Flags • as of monthly QI report 3/1/2023**

<b>BH QARR • Improvement Measure</b>	No Diabetes Screening (Gluc/HbA1c) Schiz or Bipolar on Antipsychotic • No Metabolic Monitoring (Gluc/HbA1c) on Antipsychotic • No Metabolic Monitoring (LDL-C) on Antipsychotic
<b>General Medical Health</b>	No Diabetes Screening (Gluc/HbA1c) Schiz or Bipolar on Antipsychotic Adults • No Metabolic Monitoring (Gluc/HbA1c and LDL-C) on Antipsychotic (All) • No Outpatient Medical Visit > 1Yr
<b>Health Home Care Management - Adult</b>	Eligible for Health Home Plus - No Health Home Plus Service Past 12 Months • Eligible for Health Home Plus - No Health Home Plus Service Past 3 Months • Eligible for Health Home Plus - Not Health Home Enrolled • HARP Enrolled - Not Health Home Enrolled •

**Diagnoses Past Year**

<b>Behavioral Health (8)</b>	<b>5 Most Recent:</b> Delusional Disorder • Other Mental Disorders • Bipolar I • Unspecified/Other Anxiety Disorder • Unspecified/Other Psychotic Disorders ... <b>5 Most Frequent (# of services):</b> Bipolar I (23) • Delusional Disorder (21) • Other Mental Disorders (2) • Brief Psychotic Disorder (ICD10 Only) (1) • Narcissistic Personality Disorder (1) ...
<b>Medical (2)</b>	<b>Most Recent:</b> Other symptoms and signs involving general sensations and perceptions • Abnormal serum enzyme levels <b>Most Frequent (# of services):</b> Other symptoms and signs involving general sensations and perceptions (1) • Abnormal serum enzyme levels (1)

# Utilization Reports

# Utilization Reports

- Three aggregate reports
  - Medicaid Managed Care Plan and Product Line
  - Provider Network (all of the other providers who have served that agency's clients, not restricted to your network)
  - Service Settings and Volume (count of total individuals and of total service claims/encounters received, by service type)
- Current functionality
  - First select a provider in you network in order to view these reports about clients served by that provider
- Future enhancements
  - Aggregate reports for all clients served by any provider in your network
  - Cost data reports



# MAIN STREET MENTAL HEALTH CENTER



PROVIDER: MAIN STREET MENTAL HEALTH CENTER

Filters

Reset

Medicaid Managed Care Plan and Product Line

Provider Network

Service Settings and Volume

The distribution of Medicaid Managed Care Plans and Product Lines for MAIN STREET MENTAL HEALTH CENTER current Medicaid clients.

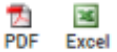
Name	Total Clients	Mainstream	HARP	HIV SNP	LTC FIDA	LTC MAP	LTC PACE	LTC Partial Cap	Medicaid Advantage
Agewell New York	1							1	
Atena Better Health	2							2	
Centers Plan for Healthy Living	10					1		9	
ElderPlan	3							3	
Extended MLTC	1							1	
Fidelis Care New York	472	450	18					4	
HIP (EmblemHealth)	32	27	5						
HealthPlus	43	41	2						
Healthfirst PHSP, Inc.	309	286	19			4			
Integra MLTC Inc	5							5	
MetroPlus Health Plan	2	2							
Molina Healthcare of New York	96	95	1						
UnitedHealthcare Community Plan	109	105	4						
VNSNY Choice Select Health	3							3	
<b>Medicaid Managed Care Plan Total (A)</b>	<b>1,088</b>	<b>1,006</b>	<b>49</b>			<b>5</b>		<b>28</b>	
Medicaid Fee For Service* (B)	119								
<b>Medicaid All Client Total (A + B)</b>	<b>1,207</b>	<b>1,006</b>	<b>49</b>			<b>5</b>		<b>28</b>	

-- Current Clients are defined as individuals who received a Medicaid billed service from MAIN STREET MENTAL HEALTH CENTER in the past year 03/01/2022 - 03/01/2023.

-- The Managed Care Plan and Product Line were refreshed as of the 04/17/2023.

\* Medicaid Fee for service count includes any client who lost their Medicaid coverage during the report time period.

# MAIN STREET MENTAL HEALTH CENTER



PROVIDER: MAIN STREET MENTAL HEALTH CENTER

[Filters](#) [Reset](#)

Medicaid Managed Care Plan and Product Line **Provider Network** Service Settings and Volume

The distribution of agencies providing services to MAIN STREET MENTAL HEALTH CLINIC current Medicaid clients.

Provider Name	Total Clients	IP-Medical	IP-SUD	IP-MH	ER/CPEP Medical	ER/CPEP MH	ER/CPEP SUD	OP-Medical	OP-SUD	OP-MH	OP-DD	Health Home	Residential/Living	Pharm	Other Services
Unduplicated Count of Clients	<a href="#">1,178</a>	<a href="#">111</a>	<a href="#">10</a>	<a href="#">63</a>	<a href="#">320</a>	<a href="#">102</a>	<a href="#">12</a>	<a href="#">1,096</a>	<a href="#">15</a>	<a href="#">125</a>	<a href="#">27</a>	<a href="#">175</a>	<a href="#">190</a>	<a href="#">963</a>	<a href="#">1,108</a>
CVS ALBANY LLC	<a href="#">575</a>													<a href="#">574</a>	<a href="#">1</a>
*MEDS OOS PHYSICIAN & OTHE	<a href="#">567</a>							<a href="#">338</a>					<a href="#">41</a>		<a href="#">325</a>
QUEST DIAGNOSTICS INC	<a href="#">367</a>														<a href="#">367</a>
SUNRISE MEDICAL LABORATORIES	<a href="#">247</a>														<a href="#">247</a>
NYU LANGONE HOSPITALS	<a href="#">216</a>	<a href="#">30</a>	<a href="#">1</a>	<a href="#">6</a>	<a href="#">88</a>	<a href="#">17</a>	<a href="#">1</a>	<a href="#">132</a>		<a href="#">16</a>			<a href="#">8</a>	<a href="#">6</a>	<a href="#">39</a>
NORTH SHORE LIJ HLTH SYS LABS	<a href="#">204</a>														<a href="#">204</a>
*MEDS OOS LAB	<a href="#">202</a>														<a href="#">202</a>
NASSAU HEALTH CARE CORP/ NASSAU UNIV MED CTR	<a href="#">195</a>	<a href="#">25</a>	<a href="#">3</a>	<a href="#">29</a>	<a href="#">61</a>	<a href="#">44</a>	<a href="#">5</a>	<a href="#">95</a>		<a href="#">15</a>			<a href="#">1</a>		<a href="#">81</a>

First Previous **1** 2 Next Last

-- Current Clients are defined as individuals who received a Medicaid billed service from MAIN STREET MENTAL HEALTH CENTER in the past year 03/01/2022 - 03/01/2023.  
 -- Clients included in this report also received a Medicaid billable service from a different provider during the time period (09/01/2021 - 09/01/2022). This timeframe was used to provide agencies with an estimate of a full year of utilization, allowing a 6 months data lag for claims/encounters to be submitted to DOH.  
 -- Abbreviations: IP = Inpatient; SUD = Substance Use Disorder; MH = Mental Health; ER = Emergency Room; OP = Outpatient; DD = Developmental Disability; Pharm = Pharmacy(Medications only);  
 -- \*MEDS OOS : refers to services where the provider name was not specified or was out of state.

# MAIN STREET MENTAL HEALTH CENTER



PROVIDER: MAIN STREET MENTAL HEALTH CENTER

Filters

Reset

Medicaid Managed Care Plan and Product Line

Provider Network

Service Settings and Volume

Volume and type of Medicaid services provided by any agency to MAIN STREET MENTAL HEALTH CLINIC current Medicaid clients.

Service Settings/Type	MAIN STREET MENTAL HEALTH CLINIC		Any Other Provider		Total	
	Clients with services	Claims/Encounters by these clients	Clients with services	Claims/Encounters by these clients	Unduplicated Clients with services	Claims/Encounters by these clients
<b>Unduplicated Count of Clients</b>	<a href="#">227,103</a>	<b>2,138,522</b>	<a href="#">259,188</a>	<b>18,036,617</b>	<a href="#">266,269</a>	<b>19,661,199</b>
ACT - MH Specialty			<a href="#">283</a>	3,162	<a href="#">283</a>	3,162
Any OMH Outpatient Specialty MH Services			<a href="#">196</a>	6,368	<a href="#">196</a>	6,368
CDT - MH Specialty			<a href="#">82</a>	16,379	<a href="#">82</a>	16,379
CORE Psychosocial Rehabilitation - Education Focus			<a href="#">22</a>	139	<a href="#">22</a>	139
CORE Psychosocial Rehabilitation - Employment Focus			<a href="#">23</a>	233	<a href="#">23</a>	233
CORE or HCBS All			<a href="#">196</a>	6,368	<a href="#">196</a>	6,368
CORE or HCBS Community Psychiatric Support and Treatment			<a href="#">16</a>	198	<a href="#">16</a>	198
CORE or HCBS Empowerment Services - Peer Support			<a href="#">109</a>	3,129	<a href="#">109</a>	3,129
CORE or HCBS Family Support and Training			<a href="#">12</a>	66	<a href="#">12</a>	66
CORE or HCBS Psychosocial Rehabilitation - Any			<a href="#">86</a>	1,849	<a href="#">86</a>	1,849
CPEP Mobile Crisis			<a href="#">216</a>	324	<a href="#">216</a>	324
Child Care - MH - Residential Treatment Facility			<a href="#">6</a>	135	<a href="#">6</a>	135

Previous **1** Next

-- Current Clients are defined as individuals who received a Medicaid billed service from MAIN STREET MENTAL HEALTH CLINIC in the past year 03/01/2022 - 03/01/2023.  
 -- Clients included in this report received Medicaid billable service from HISPANIC COUNSELING CENTER, INC. in the past year and received a Medicaid billable service from either MAIN STREET MENTAL HEALTH CLINIC or any other provider during the time period (09/01/2021 - 09/01/2022). This timeframe was used to provide agencies with an estimate of a full year of utilization, allowing a 6 months data lag for claims/encounters to be submitted to DOH.  
 -- ABBREVIATIONS: SUD = SUBSTANCE USE DISORDER; MH = MENTAL HEALTH; ER = EMERGENCY ROOM; DD = DEVELOPMENTAL DISABILITY; OPWDD = OFFICE FOR PEOPLE WITH DEVELOPMENTAL DISABILITIES.  
 -- \*MEDS OOS : refers to services where the provider name was not specified or was out of state.

# Training & Technical Assistance

# PSYCKES Training

- PSYCKES website: [www.psyckes.org](http://www.psyckes.org)
- Webinars
  - Live & Recorded Webinars (posted on our PSYCKES Training Webinars page):
    - Using PSYCKES Quality Indicator Reports
    - Navigating PSYCKES Recipient Search for Population Health
    - Using the PSYCKES Clinical Summary
    - Consent, Emergency, Quality Flag: PSYCKES Levels of Access
    - PSYCKES Mobile App for iPhones & iPads
    - Introduction to PSYCKES
    - Where to Start: Getting Access to PSYCKES
    - Introduction to the Token Self Service Console
- PSYCKES User Guides & Short How-To Videos
  - [www.psyckes.org](http://www.psyckes.org) > PSYCKES Training Materials

# Have you heard about the Self-Service Console?

- The Self-Service Console is a way to manage your RSA token and PIN, for logging into secure OMH applications, including PSYCKES
- The console is accessed at: [mytoken.ny.gov](https://mytoken.ny.gov)
- From within your Self-Service Console account, you can:
  - Set security questions
  - Reset your PINs
  - Activate tokens
  - Request a replacement token
- We recommend all users set up security questions in the console so that you can reset your own PIN if ever needed
- As of April 2022, the console must be used when new users need a token or existing users need a replacement token

# Helpdesk Support

- PSYCKES Help (PSYCKES support)
  - 9:00AM – 5:00PM, Monday – Friday
  - PSYCKES-help@omh.ny.gov
- ITS Help Desk (Token, Login & SMS support)
  - Provider Partner OMH Helpdesk:
    - 1-800-435-7697; healthhelp@its.ny.gov
  - OMH Employee ITS Helpdesk:
    - 1-844-891-1786; fixit@its.ny.gov